

Fill in this information to identify your case:

Debtor <u>Katherine M. Goczynski</u> First Name Middle Name Last Name	Debtor 2 (Spouse if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: _____ District of: _____	
Case number (if known) <u>22-19173</u>	

FILED
JEANNE A. NAUGHTON, CLERK

DEC 19 2022

U.S. BANKRUPTCY COURT
TRENTON, NJ
BY [Signature] DEPUTY

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 108A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1 Denis Coughlan
Name
138 Sophie Lane
Number Street
Lakewood NJ 08701
City State ZIP Code

Mortgage

2.2 Geico
Name
P.O. Box 70776
Number Street
Philadelphia PA 19176-0776
City State ZIP Code

Car Insurance

2.3 Verizon
Name
P.O. Box 15124
Number Street
Albany, NY 12212-5124
City State ZIP Code

Cell phone

2.4 JCP&L
Name
P.O. Box 3687
Number Street
Akron, OH 44309-3687
City State ZIP Code

Electric

2.5 Optimum
Name
P.O. Box 70340
Number Street
Philadelphia, PA 19176-0340
City State ZIP Code

Cable

Additional Page If You Have More Contracts or Leases**Person or company with whom you have the contract or lease****What the contract or lease is for**22. Covington Village Condo Assoc.

Name P.O. Box 67750
 Number Street
Phoenix AZ 85082-7750
 City State ZIP Code

HOA23. Nissan Motor Acceptance Corp

Name P.O. Box 660360
 Number Street
Dallas TX 75266-0360
 City State ZIP Code

Car payment24. New Jersey Natural Gas

Name P.O. Box 11743
 Number Street
Newark, NJ 07101-4743
 City State ZIP Code

Gas25. Globe Life Ins.

Name 37005 Stonebridge Drive
 Number Street
McKinney, Texas 75070
 City State ZIP Code

Life Insurance Policy26. Americo Financial Life and

Name Annuity Insurance Company
300 W. 11th St., P.O. Box 410298
 Number Street
Kansas City, Missouri 64141
 City State ZIP Code

Death Benefit Ins.27. Amerisave Mortgage

Name P.O. Box 371306
 Number Street
Pittsburgh PA 15250
 City State ZIP Code

Mortgage28. Name _____

Number Street
 City State ZIP Code

29. Name _____

Number Street
 City State ZIP Code

Print**Save As...****Add Attachment****Reset**

Fill in this information to identify your case:

Debtor 1 First Name	Katherine M.	Middle Name	Gokczynski	Last Name
Debtor 2 (Spouse, if filing) First Name		Middle Name		Last Name
United States Bankruptcy Court for the:		District of		
Case number (if known)		22-19173		

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No
 Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent _____

Number Street _____

City State ZIP Code _____

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Denis Coughlan
Name _____
138 Sophee Lane
Number Street _____
Lakewood NJ 08701
State ZIP Code _____
City _____

3.2 _____
Name _____
Number Street _____
State _____
ZIP Code _____
City _____

3.3 _____
Name _____
Number Street _____
State _____
ZIP Code _____
City _____

Schedule D, line 2.1
 Schedule E/F, line _____
 Schedule G, line 2.1

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Additional Page to List More Codebtors**Column 1: Your codebtor**

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

3.

Name _____

Number Street _____

City _____ State _____ ZIP Code _____

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

 Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____ Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____ Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____ Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____ Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____ Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____ Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____ Schedule D, line _____ Schedule E/F, line _____ Schedule G, line _____**Print****Save As...****Add Attachment****Reset**

Fill in this information to identify your case:

Debtor 1 <u>Katherine M.</u> First Name	Middle Name <u>Gorczyński</u>	Last Name
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _____ District of _____		
Case number (if known)	22-19173	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
MM / DD / YYYY

Official Form 106I

12/15

Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Debtor 2 or non-filing spouse

- Employed
 Not employed

- Employed
 Not employed

Occupation

Custodial Supervisor

Employer's name

Aramark

Employer's address

855 Somerset Ave.

Number Street

Number Street

Lakewood NJ 08701

City State ZIP Code

City State ZIP Code

How long employed there?

6 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or
non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$4,230

\$ _____

3. Estimate and list monthly overtime pay.

3. + \$ 0

+ \$ _____

4. Calculate gross income. Add line 2 + line 3.

4. \$4,230

\$ _____

Debtor 1 Katherine M. Gockczynski

First Name

Middle Name

Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....	→ 4. \$ <u>4,230</u>	\$ _____
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>1,005</u>	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____
5e. Insurance	5e. \$ <u>241.00</u>	\$ _____
5f. Domestic support obligations	5f. \$ _____	\$ _____
5g. Union dues	5g. \$ _____	\$ _____
5h. Other deductions. Specify: _____	5h. +\$ _____	+ \$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$ _____		\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ <u>2,984</u>		\$ _____
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ _____	\$ _____
8b. Interest and dividends	8b. \$ _____	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____
8d. Unemployment compensation	8d. \$ _____	\$ _____
8e. Social Security	8e. \$ _____	\$ _____
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ _____	\$ _____
8g. Pension or retirement income	8g. \$ _____	\$ _____
8h. Other monthly income. Specify: _____	8h. +\$ _____	+ \$ _____
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$ _____		\$ _____
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>2,984</u> + \$ _____	= \$ <u>2,984</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + \$ _____	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ <u>2,984</u>	
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1 Katheline M.	First Name	Middle Name	Last Name Golczynski
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _____ District of _____			
Case number (if known)	22-19173		

 Check if this is an amended filing**Official Form 106D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim.	Column C Unsecured portion if any
--	---	--

2.1 AmeriSave Mortgage	Describe the property that secures the claim: 138 Sophie Lane Lakewood, NJ 08701	\$ 138,000	\$ 216,000	\$
Creditor's Name P.O. Box 371306	Number Street			

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **3207**

2.2 Nissan Motor Corp	Describe the property that secures the claim: 2019 Nissan Sentra	\$ 18,533	\$ 11,600	\$
Creditor's Name P.O. Box 660360	Number Street			

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred **2019**

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here: **\$ 156,533**

Debtor 1 Katherine M. Golecynski

Document Page 8 of 12

Case number (if known) 22-19173**Additional Page**

Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion of any
Do not deduct the value of collateral.		If any

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here: \$ _____

\$ _____
\$ _____

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: _____

Debtor 1 First Name Middle Name Last Name Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

 Name _____

 Number Street _____

 City _____ State _____ ZIP Code _____

 Name _____

 Number Street _____

 City _____ State _____ ZIP Code _____

 Name _____

 Number Street _____

 City _____ State _____ ZIP Code _____

 Name _____

 Number Street _____

 City _____ State _____ ZIP Code _____

 Name _____

 Number Street _____

 City _____ State _____ ZIP Code _____

 Name _____

 Number Street _____

 City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Print**Save As...****Add Attachment****Reset**

Fill in this information to identify your case:

Debtor 1 First Name	Middle Name	Last Name
Katherine M.		Gorczyński
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	District of	
Case number (If known)	22-191-73	

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$ 138,000
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$ 19,200
1c. Copy line 63, Total of all property on Schedule A/B	\$ 178,500

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D	\$ _____
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$ 7,051
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ _____
	Your total liabilities \$ _____

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$ 4,230
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$ 2906.167

Debtor 1 Katherine M. Goleczynski
First Name Middle Name Last Name

Document Page 11 of 12

Case number (if known)

22-19173

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 14,230

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**Total claim****From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.) \$ _____

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ 7,051

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ _____

9d. Student loans. (Copy line 6f.) \$ _____

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ _____

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ _____

9g. Total. Add lines 9a through 9f. \$ 7,051

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FROM L.G. ENV
LAKEWOOD, NJ
08701
DEC 16, 2022
AMOUNT
\$1.68
R2304H107700-08



08608



RDC 99

United States Bankruptcy Court
District of New Jersey
402 East State Street
Trenton, NJ 08608
Attn: Clerk